Kluozoy

### 510(k) Summary 807.92(c)

FEB 1 9 2010

**SPONSOR** 

807.92(a)(1)

Company Name:

**Best NOMOS** 

Company Address

One Best Drive

Pittsburg, PA 15202

Telephone:

(800) 70-NOMOS

Contact Person:

Andrew Chi Palko

Summary Preparation Date: November 24, 2009

**DEVICE NAME** 

807.92(a)(2)

Trade Name:

Sonalis® Ultrasound System

Common/Usual Name:

Diagnostic Ultrasound System

Classification Name:

Ultrasonic pulsed echo imaging system,

Diagnostic ultrasonic transducer

Regulation Number:

892.1560, 892,1570

Product Code:

IYO, ITX

Product Code,

71. II

Device Class:

Class II

PREDICATE DEVICE

807.92(a)(3)

Legally Marketed Equivalent Device

Company

Product

510(k) #

3G Ultrasound Inc.

Sonalis Ultrasound System

K043189

#### DEVICE DESCRIPTION

807.92(a)(4)

The SONALIS® is a real time, two-dimensional, diagnostic system that produces high quality images. The system currently supports imaging applications for trans-rectal ultrasound imaging. The system consists of:

- system console,
- keyboard,
- ultrasound probe,
- ultrasound probe connector,
- power cord,
- high resolution LCD monitor to display the image,
- System Operating Manual
- B&W graphic printer

#### **DEVICE INTENDED USE**

807.92(a)(5)

The SONALIS® system and transducers are intended for diagnostic ultrasound imaging of the human body. The clinical application is trans-rectal imaging. Typical examination using the SONALIS® Platform system: Prostate and Rectal wall studies.

COMPARISON OF TECHNICAL CHARACTERISTICS 807.92(a)(6)

This device operates identically to the predicate device in that the piezoelectrical material in the transducer is used as an ultrasound source to transmit sound waves into the body. Sound waves are reflected back to the transducer and converted to electrical signals that are processed and displayed as a 2D images.

#### NONCLINICAL AND CLINICAL TEST

807.92(b)

#### SAFETY and EFFECTIVENESS

The SONALIS® is compliant to the safety standards.

UL60601-1 (2003), 1<sup>st</sup> Edition Medical Electrical Equipment, Part 1, General Requirements for Safety

IEC 60601-1 (1988), 2<sup>nd</sup> Edition, Medical Electrical Equipment, Part 1: General Requirements for Safety +A1(91) + A2(95)

IEC 60601-2 (2001), 2nd Edition Medical Electrical Equipment Part 1-2: General Requirements for Safety - Collateral Standard: Electromagnetic compatibility IEC 60601-2-37 (2001), 1st Edition Medical Electrical Equipment Part 2-37: Particular Requirements for the Safety of Ultrasonic Medical Diagnostic and Monitoring Equipment +A1(2004)

#### BIOCOMPATIBILITY

SONALIS® was tested in accordance with the testing requirements of the ISO 10993 Recognized Standards and found to be safe for its intended use.

#### **CONCLUSION**

807.92(b)(3)

The SONALIS® Ultrasound System is the same device as the predicate except for updated components that do not affect safety and efficacy. The SONALIS® Ultrasound System is the same device

- Intended Use
- Design
- Technological Characteristics

The Sonalis Ultrasound System introduces no new questions concerning the safety or effectiveness and is thus substantially equivalent to the predicate device.

Public Health Service

Food and Drug Administration 10903 New Hampshire Avenue Document Control Room – WO66-G609 Silver Spring, MD 20993-0002

Best NOMOS % Mr. Ned Devine Senior Staff Engineer Underwriters Laboratories, Inc. 333 Pfingsten Road NORTHBROOK IL 60062

FEB 1 9 2010

Re: K100204

Trade/Device Name: SONALIS

Regulation Number: 21 CFR 892,1560

Regulation Name: Ultrasonic pulsed echo imaging system

Regulatory Class: II

Product Code: IYO and ITX Dated: January 15, 2010 Received: January 22, 2010

#### Dear Mr. Devine:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into class II (Special Controls), it may be subject to such additional controls. Existing major regulations affecting your device can be found in Title 21, Code of Federal Regulations (CFR), Parts 800 to 895. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Parts 801 and 809); medical device reporting (reporting of

medical device-related adverse events) (21 CFR 803); and good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820). This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Parts 801 and 809), please contact the Office of *In Vitro* Diagnostic Device Evaluation and Safety at (301) 796-5450. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to <a href="http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm">http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm</a> for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address <a href="http://www.fda.gov/cdrh/industry/support/index.html">http://www.fda.gov/cdrh/industry/support/index.html</a>.

Sincerely yours,

Donald J. St. Pierre

**Acting Director** 

Division of Radiological Devices
Office of *In Vitro* Diagnostic Device

**Evaluation and Safety** 

Center for Devices and Radiological Health

Enclosure

## **Indications for Use**

510(k) Number (if known): K100204	4		
Device Name: SONALIS			
Indications for Use:			
The SONALIS® system and transduction human body. The clinical application		=	d imaging of the
Typical examination using the SONA	ALIS® Platform s	ystem: Prostate and Rec	tal wall studies.
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•			
Prescription UseX(Part 21 CFR 801 Subpart D)	AND/OR	Over-The-Counter U (21 CFR 807 Subp	
(PLEASE DO NOT WRITE BEL NEEDED)	OW THIS LINE-	CONTINUE ON ANO	THER PAGE IF
Concurrence of CDRH,	, Office of In Vitro	o Diagnostic Devices (C	OIVD)
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Division of Radiological D Office of In Vitro Diagnostic Device Evalu		Paş	ge 1 of 1
510(k) Number K 100 200	1		

#### TRACK 1

# Diagnostic Ultrasound Indications for Use Form Fill out one form for each ultrasound system and each transducer.

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

Mode of Operation Clinical Application Other A B M PWD CWD Color Amplitude Color Combined (specify) Doppler Velocity (specify) Imaging Ophthalmic . Fetal Abdominal Intraoperative (specify) Intraoperative Neurological Pediatric Small Organ (specify) Neonatal Cephalic Adult Cephalic Cardiac Transesophageal Transrectal Transvaginal Transurethral Intravascular Peripheral Vascular **Laparoscopic** Musculo-skeletal Conventional Musculo-skeletal Superficial Other (specify) N= new indication: P= previously cleared by FDA; E= added under Appendix E

Division of Radiological Devices
Office of *In Vitro* Diagnostic Device Evaluation and Safety

510(k) Number K100204